

Nuffield Health

Nuffield Health Reading Fitness and Wellbeing Centre

Inspection report

240 South Oak Way
Lime Square
Reading
Berkshire
RG2 6UL
Tel: 01189 750550
Website: www.nuffieldhealth.com

Date of inspection visit: 6 December 2018
Date of publication: 07/01/2019

Overall summary

We carried out an announced inspection at Nuffield Health Reading Fitness and Wellbeing Centre on 13 December 2017. We found that this service was not providing well-led care in accordance with the regulations. The full report on the December 2017 inspection can be found by selecting the 'all reports' link for Nuffield Health Reading Fitness and Wellbeing Centre on our website at www.cqc.org.uk.

The provider was asked to make improvements regarding staff training and knowledge of the Mental Capacity Act 2005 and verifying patient identity. In addition, we asked the provider to improve the system for monitoring actions from patient safety alerts.

This inspection was an announced focused inspection carried out on 6 December 2018 to confirm that the service had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 13 December 2017. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory

functions. This inspection was planned to check whether the service was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008.

We carried out an announced focused follow-up inspection on 6 December 2018 to ask the service the following key question; Are services well-led?

Our findings were:

Are services well-led?

We found that this service was providing well-led care in accordance with the relevant regulations

Nuffield Health Reading Fitness and Wellbeing Centre provide health assessments that include a range of screening processes. Following assessment and screening, patients undergo a consultation with a doctor to discuss the result findings, recommend lifestyle changes and decide on any treatment plans or referrals.

Our key findings were:

- The service had ensured all clinical staff (including doctors and physiologists) had received up to date training on the Mental Capacity Act 2005.

Summary of findings

- The provider had reviewed the identity checking procedure and advised locations they did not need to make any changes to the previous process. The location was reviewing this.

We reviewed the actions undertaken as a result of patient safety alerts. A tracker had been commenced which detailed what the alert was and who had actioned it. The tracker was managed by the clinic manager.

There were areas where the provider could make improvements and should:

- Consider the risks associated with not undertaking identity checks on clients.

Professor Steve Field CBE FRCP FFPH FRCGP Chief
Inspector of General Practice

Nuffield Health Reading Fitness and Wellbeing Centre

Detailed findings

Background to this inspection

Nuffield Health Reading Fitness and Wellbeing Centre is registered with the Care Quality Commission to provide the regulated activities; Diagnostic and screening procedures and treatment of disease, disorder and injury. The provider Nuffield Health has their registered headquarters in Epsom, Surrey.

Health assessments are delivered in a purpose-built clinic located within the health and wellbeing centre on an industrial park in Reading, Berkshire. The service is located at:

240 South Oak Way, Lime Square, Reading, Berkshire, RG2 6UL.

Nuffield Health Reading Fitness and Wellbeing Centre provide health assessments to adults that include a range of testing and screening processes carried out by a physiologist and a doctor. Following the assessment and screening process patients undergo a consultation with a doctor to discuss the findings of the results and any recommended lifestyle changes or treatment planning. Patients can also access physiotherapy at the clinic, but this part of the service was not inspected as part of this inspection.

There are currently two doctors and two physiologists who work at the centre. One of the physiologists is also the clinic manager. Patients can choose to see a female or male staff member when booking in for health assessments. In addition, patients can choose to be seen at one of the other nearby or wider health and wellbeing centres in the UK. Clients can access health assessments between 8.30am and 4.30pm Monday to Friday.

Health assessments are categorised and promoted as:

- A lifestyle health assessment, for patients wanting to reduce health risks.
- A female assessment, for all aspects of female health (including cervical smear testing).
- A 360 health assessment which includes a review of diabetes and heart health risks.
- A 360+ health assessment which focus on cardiovascular health.
- General PATH health assessments were also available for areas such as bone health, sexual health and bowel cancer screening. Clients can choose from a variety of assessment modules to create a bespoke health assessment for their needs. The assessments were either undertaken by a doctor or physiologist, or a combination of the two.

Details of the health assessments can be found on the provider website: www.nuffieldhealth.com.

The general manager of the centre is the registered manager. A registered manager is a person who is registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The December 2018 inspection was led by a CQC inspector who had access to advice from a specialist advisor.

During this inspection we spoke with the clinic manager, the general manager and one of the doctors. We also reviewed documents and patient records to verify actions that had been taken.

Are services well-led?

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action?)

Our findings

At our previous inspection on 13 December 2017, we found that this service was not providing well-led care in accordance with the regulations. We found governance concerns relating to identity checking processes and a lack of oversight of staff training and embedded knowledge relating to the Mental Capacity Act 2005.

We issued a requirement notice in respect of these issues and found arrangements had significantly improved when we undertook a follow up inspection of the service on 6 December 2018. The service is now providing well led care in accordance with the regulations.

Governance arrangements

The location had reviewed the monitoring of staff training. There had been two new doctors recruited to the service since the last inspection and both had received training on Mental Capacity Act 2005 (MCA) as part of their induction. We spoke with one doctor during this inspection and found they had suitable knowledge of the act and could demonstrate how they would gain consent from clients, where necessary.

We saw an online module of safeguarding training for the physiologists that included a section on MCA and how to ensure valid consent.

Patient consent was recorded in patient records. The nature of the online records used ensured that a record of consent had to be added before the clinician could move

onto the next part of the record. We viewed two patient records with consent decisions recorded, including where the client had not consented to a procedure and the doctor had recommended they follow up with their NHS GP.

The clinic manager had displayed a “definition of MCA” notice in the testing laboratory as a quick reference guide for staff. They had also asked all staff to read the MCA policy and had kept a signature sheet for staff to sign once read.

The clinic manager had decided to add a regular review of MCA to the team meeting agenda. This would allow staff to discuss any concerns or issues they had identified and to share their knowledge and experience. The first meeting with MCA added to the agenda was due in early 2019.

Appropriate and accurate information

The provider quality team had reviewed the identity checking process and advised the location they could still request a name and date of birth for clients attending for their appointments.

During the inspection, we discussed identity checking with the clinic manager and registered manager and the risks associated with not verifying identity beyond the current procedure. They decided to review how other locations undertook identity checks and would raise this with the provider at head office.

The majority of clients who requested assessment services were members of eligible organisations who had an agreement with Nuffield Health to provide them. These clients were required to provide an identity number from the external organisation as part of the booking process. As these clients had already received an identity check from the parent organisation, it was felt the risks were reduced and limited to new clients with no other identity checks in place.